

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT	Application Number	10/577,395
	Filing Date	October 29, 2004
	First Named Inventor	Ronald W. Wood
	Title	DETECTION OF NEUROPEPTIDES ASSOCIATED...
	Group Art Unit	Unknown
	Examiner Name	To be Assigned
	Attorney Docket Number	176/61672

I hereby appoint:

☒ Practitioners at Customer Number

26774

 Place Customer
Number Bar Code
Label here

☐ Practitioner(s) named below

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☒ The above-mentioned Customer Number

OR

☐ Practitioners at Customer Number

 Place Customer
Number Bar Code
Label here

OR

☐ Firm or
Individual Name

Address

City

State

Zip

Country

Telephone

Fax

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
SIGNATURE of Applicant or Assignee of Record

Name	University of Vermont and State Agricultural College
Signature	<i>[Signature]</i>
Date	4.26.07

NOTE: Signatures of all the inventors or assigners of record of the entire interest of their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 1 form is submitted.

 SEND TO: Commissioner for Patents
P.O. Box 1430
Alexandria, VA 22313-1430